

# InBody 770 TRAINING MANUAL

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# **GETTING STARTED**

# **INBODY PACKAGE**

Your InBody 770 order includes:



Additional accessories can be purchased at www.inbodyusa.com

# **GETTING STARTED**

# **DEVICE PARTS**



# THE INBODY TEST

## TEST PREPARATION

Before each InBody Test, follow these guidelines to ensure your test results are accurate:

#### Prior to testing, avoid:

- **x** Exercising 6-12 hours prior
- **x** Eating 3-4 hours prior
- **x** Consuming alcohol or caffeine 24 hours prior
- **x** Using a shower or sauna
- **x** Using lotion or ointment on hands or feet

#### Prior to testing, do:

- O Hydrate well the day before
- Stand upright for at least 5 minutes
- Use the bathroom
- Remove all socks, pantyhose, shoes, articles of heavy clothing (jackets) and metal objects (jewelry, watches, belts)

• Warm yourself up for 20 minutes if you are testing in cold weather



Please consult a physician before testing if you are pregnant, menstruating, or have medical implants such as pacemakers and other life-sustaining medical implants.



# THE INBODY TEST

## **HOW TO TEST**

The InBody unit utilizes voice commands to guide the user through the InBody Test. The following steps are elaborated to provide you with detail to the proper testing procedures.



1. Remove shoes, socks, heavy articles of clothing, and items in pockets if you have not done so already. Wipe hands and feet with an InBody Tissue (optional).



2. Stand on the device barefoot and align heel with the round silver electrodes and the rest of the feet with the foot electrode. Stay still and wait for weight to be measured.



3. After weight is measured, input your Age, Height, and Gender. Entering a unique ID is optional but recommended because using an ID will record and track your progress.



4. When prompted, grab the hand electrodes by placing your thumbs on the thumb electrodes and wrapping your fingers around the bottom electrodes. Keep your arms relaxed and extend slightly away from the torso so that your armpits are not touching one another (roughly 15 degrees).

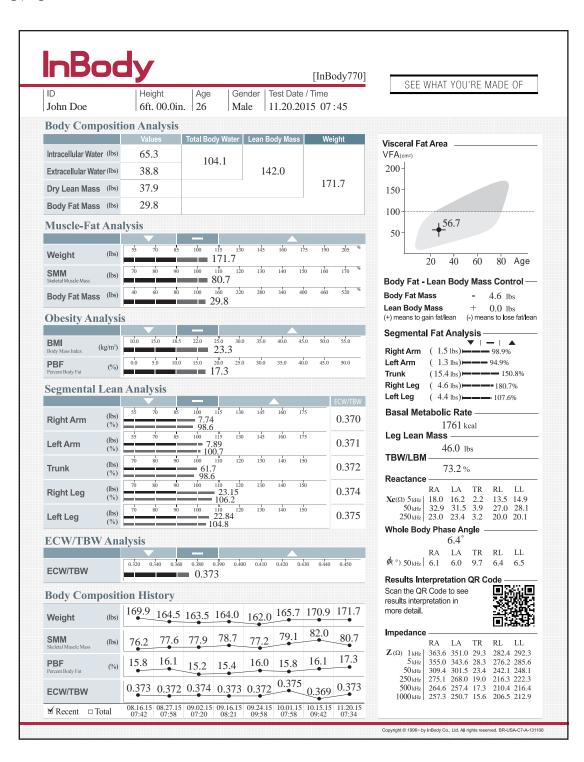


The InBody Test will take 60 seconds and your results will print automatically after testing.

Remember to test every 2-4 weeks to monitor and track your progress.

## SAMPLE RESULTS SHEET

This is the body composition results sheet that the InBody 770 prints out. Understand each output section in the following pages.



## **BODY COMPOSITION ANALYSIS**

<b>Body Compositi</b>	ion Analysis			
	Values	Total Body Water	Lean Body Mass	Weight
Intracellular Water (lbs)	65.3	104.1		
Extracellular Water (lbs)	38.8	104.1	142.0	
Dry Lean Mass (lbs)	37.9			171.7
Body Fat Mass (lbs)	29.8			

The InBody 770 applies a quantitative value to the various components of the body's composition. These values represent the weight of each compositional component that comprises the examinee's total body weight.

#### 1) Intracellular Water, Extracellular Water and Total Body Water

The InBody 770 measures Total Body Water by using multi-frequencies, separating TBW into Intracellular Water and Extracellular Water. Intracellular water (ICW) indicates the amount of water within the cellular membrane. Extracellular water (ECW) indicates the total amount of water in the interstitial fluid and blood.

#### 2) Dry Lean Mass

Dry Lean Mass is the total body mass minus the water and the fat mass. It is composed primarily of proteins and mineral. Protein is solid in body cells, comprised of polymers of organic compounds, including nitrogen, and is a major component of muscle. Protein is directly related to intracellular water. A lack of protein can be indicative of poor nutrition.

#### 3) Body Fat Mass

Body Fat Mass indicates the total quantity of lipids that can be extracted from fat and all other cells. BIA technology does not directly measure Body Fat Mass, but is determined as being the remaining poundage value after subtracting Lean Body Mass from the total body weight. Body Fat Mass is found stored under the skin, in visceral areas, and between muscles. When an examinee's fat mass is higher than the standard range, he/she is diagnosed as being obese. Monitoring the amount of body fat mass an individual has is critical to maintaining good health.

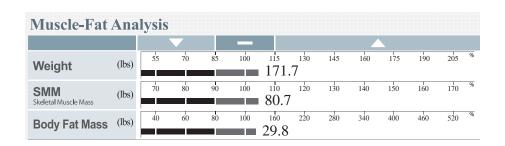
#### 4) Lean Body Mass

Lean Body Mass refers to the entire body weight with the exception of Body Fat Mass. The InBody 770 provides both the fundamentals as well as the comprehensive data related to Lean Body Mass that can aid in the evaluation of the health status of the examinee. As reference, athletic body types will have a higher proportion of Lean Body Mass compared to normal body types. As such, it is important for all body types alike to monitor their Lean Body Mass.

#### 5) Body Weight

The InBody 770 technology provides the ability to separate body weight into Total Body Water, Dry Lean Mass, and Body Fat. Body weight is the total sum of these three components.

## MUSCLE-FAT ANALYSIS



The Muscle-Fat Analysis uses bar graphs to provide a comparison between Weight, Skeletal Muscle Mass, and Body Fat Mass. The lengths of the bar graphs indicate the relationship between the current weight to the average value for that specific component, based on the examinee's height. Therefore, an individual with a score of 100% indicates the individual is at the average value, calculated based on the average weight based on their height for that particular segment.

#### 1) Weight

The horizontal bar graph helps to visualize the examinee's current body weight in relation to the average weight. The numbers next to the bar graphs indicate the numerical values for that examinee's body weight. Standard weight indicates the average value in accordance with the examinee's height. The InBody770 provides the standard weight range, based on the BMI (Body Mass Index) Standard Weight Index.

#### 2) Skeletal Muscle Mass

In comparison to the average weight, 100% Skeletal Muscle Mass indicates the examinee being measured has reached the average weight in Skeletal Muscle Mass. The normal range of SMM is 90-110% of the standard SMM. Change in skeletal muscle, as the result of increased exercise and diet modifications, is the most effective indicator of health improvements.

#### 3) Body Fat Mass

Body Fat Mass represents all of the fat cells an individual has in their body. 100% Body Fat Mass indicates the examinee being measured is at the average weight in Body Fat Mass, based on the examinee's height. The average range of Body Fat Mass is established by calculating an examinee's body fat mass and comparing it to the average total body weight and average Body Fat Mass.

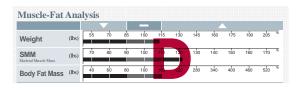


## MUSCLE-FAT ANALYSIS

#### 8 Different Body Types You May Encounter in Your Daily Practice:

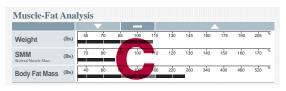
The Muscle-Fat Analysis has been designed so the examinee can easily understand their current health status; this facilitates their ability to follow programs designated by their healthcare provider and/or fitness coach. The test administrator can apply alphabetical shapes, based on the length of the Weight, Skeletal Muscle Mass, and Body Fat Mass graphs, to provide simplified explanations to the examinees regarding their overall health.

1. The varying lengths of the three bar graphs form a slight curved 'D', which occurs when the Skeletal Muscle Mass bar graph is longer than the Weight and Body Fat Mass bar graphs. This is the ideal body composition, and this examinee should strive to maintain this healthy state. In this case, the examinee should



be aware that abdominal fat often increases as a person gets older, and there should be an emphasis on continuously monitoring their body to ensure that this healthy state is maintained.

2. At the opposite end of the health spectrum, we find the 'C'-shaped graph, which is characterized by a Skeletal Muscle Mass graph that is shorter than the Weight and Body Fat Mass graphs. Although the examinee's body weight might be within the normal

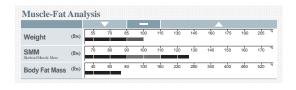


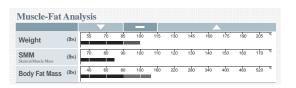
range and not be classified as obese, he/she does not have the ideal body shape. They might be experiencing difficulties managing the shape of their body through simple weight control measures. If a 'C' shaped individual begins making muscle-fat adjustments, they can maintain a satisfactory body shape without needing to necessarily lose any weight. The examinee can strive to achieve a 'D' shape in their body composition graphs by losing Body Fat Mass while gaining Skeletal Muscle Mass. Many adults who have a high level of Body Fat Mass are included in this category. It is important to note that abdominal obesity is a factor in the development

of cardiovascular diseases, which includes individuals within the standard weight range.

3.This is an example of a healthy body type with well-developed SMM. However, people in this category need to be careful not to lose too much Body Fat Mass.

4. The varying lengths of the three bar graphs indicate a person whose weight is within the standard range; however, they cannot be regarded as being in ideal health due to their low skeletal muscle mass. As shown here, the length of the Skeletal Muscle





Mass graph is shorter than the average range, while the Body Fat Mass is within the standard range. An examinee of this body type will also exhibit a 'C' shape. However, this specific type should be differentiated as being a weak "C" type, rather than an obese type. People who belong to this body type have lost intestinal and muscular protein, which is a situation caused by possible factors such as a lack of exercise, improper protein nutrition, or an increased metabolism as a result of injuries or disease. Symptoms of this include edema, the decomposition of muscle cells, changes in nerve tissues, secondary infections, and stunted growth in children.

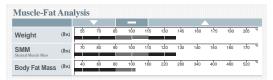
### MUSCLE-FAT ANALYSIS

5. The varying lengths of the three bar graphs represent an individual whose weight and Body Fat Mass are above the standard range, but whose Skeletal Muscle Mass graph is within the normal range. An examinee of this body type also exhibits a 'C' shape. However, this

			$\overline{}$									
Weight	(lbs)	55	70	85	100	115	130	145	160	175	190	205 238.3
SMM Skeletal Muscle Mass	(lbs)	70	80	90	100	110 37.0	120	130	140	150	160	170
Body Fat Mass	(lbs)	40	60	80	100	160	220	280	340	400	460	(602.1)

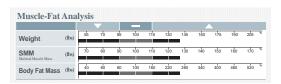
specific body type should be characterized as being an obese "C" type. People who belong to this body type are commonly diagnosed as being obese. Apart from obesity being a disease itself, individuals with this body type are also at risk for developing many other diseases. People diagnosed as obese run a higher risk of developing a myocardial infarction, congestive heart failure, hypertension, diabetes (NIDDM), large intestinal cancer, rectal cancer, and in the case of males, prostatic carcinoma. Furthermore, many other additional problems have been recognized as being related to obesity such as a decrease in tolerance to exercise, osteoarthritis, as well as a decrease in lung function.

6. This shape represents an individual who is above the average weight and SMM but is within range for Body Fat Mass. These individuals exhibit athletic body types and are often times included in the overweight/muscular category. Individuals in this group can



easily be categorized as being obese when the BMI method is used. This category of individuals is deemed to be overweight due to the increased weight of their skeletal muscle. It is important to clarify, however, that this type of person is not obese and does not need to undertake weight control measures.

7. This shape represents an individual who is over the average for weight, SMM, and BFM. Individuals who fall into this body type have an excessive amount of body weight and are diagnosed as being chronically obese. In these individuals, it is common to see the measured SMM over the average range. However, it is important to



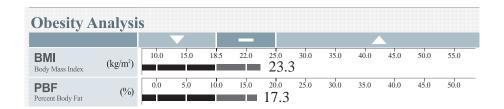
note that this is not developed through exercise: it is actually a result of the individual having excessive body mass compared to the average weight, which triggered muscle development as a response to the need to carry the excess weight. Those diagnosed as being chronically obese should seek medical treatment. It is suggested these individuals begin a weight reduction program that is designed to decrease their Body Fat Mass and work to treat and prevent any secondary diseases that may accompany this condition.

8. This shape represents an individual who is under the average weight for body weight, SMM, and BFM. Individuals within this group are identified as being underweight and having a weak body type. These individuals are at lower risk of developing secondary diseases. However, if these individuals continue to maintain this body type over

Weight	(lbs)	55	70	85	100	115	130	145	160	175	190	205	**
SMM Skeletal Muscle Mass	(lbs)	70	80	90	100	110	120	130	140	150	160	170	-
Body Fat Mass	(lbs)	40	60	80	100	160	220	280	340	400	460	520	- 50

a long period of time, an array of health complications may arise. These include a decrease in the body's ability to absorb nutrients and prevent disease, poor nutrition caused by a loss of appetite, imbalanced nutrition due to a loss of intestinal protein, metabolic disorders, as well as other issues.

## **OBESITY ANALYSIS**



#### 1) BMI

Body Mass Index (BMI) is an index used to determine obesity by using height and weight. The BMI method has been widely relied on in general medicine, dietary, and sports medicine fields as the main means of diagnosing obesity. However, this method is flawed in that it cannot be applied to adults with high levels of LBM, children, those over the age of 65, or pregnant females. Nevertheless, as BMI has been the most commonly used index, research using the BMI method to prevent adult diseases has been conducted frequently. This is why InBody770 also provides BMI-based information.

#### BMI=Weight/Height2(kg/m2)

#### 2) Percent Body Fat

The standard PBF is 15% for males and 23% for females, which are the respective midpoints of the standard ranges of Body Fat Mass in relation to standard weight: 10-20% of the standard weight for males and 18-28% for females. An individual with a calculated PBF that is greater than the standard range is regarded as having a high level of body fat. When an individual's PBF is below the standard range, they are regarded as having a low level of body fat. Individuals with low levels of body fat can be separated into two categories. The first has muscle mass that is deemed an appropriate amount for that individual's body composition. The second type has an inadequate amount of muscle mass in relation to their body composition. These individuals can be considered to be in an unhealthy state due to their imbalance of Body Fat Mass and LBM, and these individuals have a higher possibility of contracting clinical diseases.

#### PBF = Fat(lb) / Weight(lb) x100

## SEGMENTAL LEAN ANALYSIS

			$\overline{V}$								ECW/TBW
Right Arm	(lbs) (%)	55	70	85	7.7 98		130	145	160	175	0.370
Left Arm	(lbs) (%)	55	70	85	100	7.89 00.7	130	145	160	175	0.371
Trunk	(lbs) (%)	70	80	90	100	110	120	130	140	150	0.372
Right Leg	(lbs) (%)	70	80	90	100	= 23. = 106		130	140	150	0.374
Left Leg	(lbs) (%)	70	80	90	100	22.8 104.8	120	130	140	150	0.375

There are two bar graphs for each body part in the Segmental Lean Analysis graph. The display of the two bar graphs allows for a more effective and informed assessment of the current distribution of the lean mass the examinee has. The two graphs have different meanings, respectively.

The numbers beside the upper bar graph indicates the lean mass weight of the examinee in the designated segment. If the length of the upper bar graph reaches 100%, it indicates the examinee is at the ideal lean mass for that segment based on his or her ideal weight, derived from the examinee's height. Therefore, the length of the upper bar graph shows the relative ratio of the ideal lean mass based on his or her ideal weight. Since the upper bar graph is based on the lean mass of the examinee's ideal weight, the 100% value will not vary unless there is a change in his or her height.

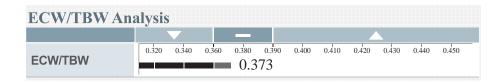
If the lower bar graph reaches 100%, it indicates the examinee is at the ideal lean mass in relation to his or her current weight. Therefore, the length of the lower bar graph indicates the relative ratio of the ideal lean mass for their current weight, while the number beside the lower bar graph shows that ratio. Since the lower bar graph is only based on the lean mass of the current weight, the 100% value will alter in accordance with weight change.

Though it is not possible to check the increase or decrease of the lean mass as with the upper graph, the lower graph will directly reflect changes in the examinee's weight, thereby allowing you to determine whether or not there is actual lean mass appropriate to his or her weight.

Segmental Lean Analysis provides examinees with the ability to observe their upper/lower lean balance, left/right lean balance, and lean body mass distribution, segmentally. This allows for close monitoring of the distribution of lean body mass to help determine if the distribution of lean mass is adequate or if changes need to be made.

The InBody 770 also provides segmental ECW/TBW ratio analysis, allowing for evaluation of abnormal water distribution that may be localized to a specific region or segment of the body. Localized fluid accumulation may be the result of inflammation, swelling, circulation, or other health conditions that may warrant evaluation by a medical professional.

# ECW/TBW ANALYSIS



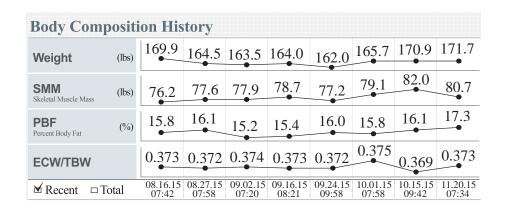
Total Body Water is composed of Intracellular Water and Extracellular Water. Extracellular Water (ECW) is the plasma water, interstitial water, transcellular water, and water found in bone, cartilage, and dense connective tissues. Intracellular Water (ICW) is the water found in the cytosol of every cell in the body.

A significant fraction of the human body is composed of body water. In diseased states the body water may be affected and become unbalanced. Body water is regulated by hormones, including the anti-diuretic hormone (ADH), aldosterone and atrial natriuretic peptide. In healthy individuals, intracellular fluid takes up roughly 62% of the body water, extracellular fluid takes up roughly 38% of the body water. Within the extracellular fluid, plasma takes up 1/5 of the extracellular fluid and interstitial fluid takes up 4/5 of the extracellular fluid.

The ECW/TBW provided on the InBody 770 allows for the monitoring of fluid distribution of the examinee. ECW/TBW can allow for the detection of unusual shifts in fluid distribution or changes in the Intracellular-Extracellular ratio. A healthy individual is expected to have a ratio of ICW to ECW is 3 to 2, which is 0.38 when calculated as ECW/TBW. To be considered within a normal range, an individual's ECW/TBW ratio is expected to fall within 0.360-0.390.

If your ECW/TBW Ratio is above 0.390, this may indicate the presence of chronic health conditions that may require medical attention/evaluation.

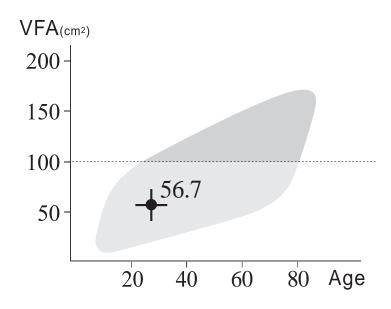
## **BODY COMPOSITION HISTORY**



After an InBody Test is taken on the InBody770, the results will be saved onto the device only if an ID is entered at the beginning of the test. The saved test results allow for monitoring of weight, LBM, Body Fat Mass and Percentage of Body Fat. An individual measuring under the same ID will have their body composition results from the last 10 tests displayed on the bottom of the result sheet in a cumulative graph.

Below the cumulative graph, it also has a data table. The cumulative graph helps for a quick and easy understanding of changes in the examinee's body composition and current condition. The body composition history allows an individual beginning a variety of health treatment plans such as dietary-exercise modifications to monitor and track their progress. This allows for body composition changes to be monitored over time, taking into account where the individual started, the progress being made, changes in the overall body composition, and the ability to identify if modifications need to be made to the treatment plan based on the body composition history.

## VISCERAL FAT AREA



Visceral Fat is the fat surrounding your major organs. InBody provides an output of the amount of visceral fat area the examinee has. Because of the location of visceral fat, the amount of visceral fat the examinee has is associated with the risk of developing certain health diseases. An accumulation of visceral fat can contribute to increased risk of Insulin-Resistant Diabetes, Heart Disease, Stroke, and even Dementia. The accumulation of visceral fat has also been associated with technical difficulties in performing surgery, specifically abdominal surgery. It is recommended to maintain a Visceral Fat Area under 100 to minimize health risks associated with excess visceral fat. Therefore, it is important to monitor the examinee's visceral fat levels provided by InBody in order to properly assess that individual's current chances of developing the mentioned health risks.

## BODY FAT-LEAN BODY MASS CONTROL

## **Body Fat - Lean Body Mass Control** —

Body Fat Mass - 4.6 lbs

**Lean Body Mass** + 0.0 lbs

(+) means to gain fat/lean (-) means to lose fat/lean

Body Fat - LBM provides the examinee a gauge that allows them to optimize the InBody770 Result for their dietary-exercise modification programs, allowing the examinee to make adjustments to the lean body mass-fat mass ratio rather than simply increasing or decreasing his/her weight. It explains to the examinee how to control his/her weight, especially by gaining or losing muscle or fat.

Here, '+' refers to the mass that must be increased, and '-' refers to the mass which should be decreased. These numbers, a unique index offered only by InBody, indicate how many pounds of Body Fat Mass should be lost / gained and how many pounds of LBM should be gained through exercise.

Many people give up in the middle of the process of treating their obesity because their weight has not changed. In many cases, the reason is that LBM has increased as much as the amount of Body Fat Mass lost. However, as their actual weight has not changed at all, the effectiveness of the weight management program may be difficult to ascertain without the use of InBody technology.

The InBody770 makes it possible for the examinee to see how much Body Fat Mass has been lost and how much LBM has been gained during the weight management program. Therefore, the InBody770 is a very useful device for identifying obesity, monitoring the weight management process, and facilitating the formation of a trust-based relationship between health professionals and their clients.

## SEGMENTAL FAT ANALYSIS & BASAL METABOLIC RATE

#### Segmental Fat Analysis –

	<b>▼</b>   <b>−</b>   <b>▲</b>
Right Arm	( 1.5 lbs) 98.9%
Left Arm	( 1.3 lbs) — 94.9%
Trunk	(15.4 lbs) — 150.8%
Right Leg	( 4.6 lbs) = 180.7%
Left Leg	( 4.4 lbs) 107.6%

#### Basal Metabolic Rate -

1761 kcal

Segmental Fat Analysis is a derivative of the segmental lean analysis. This is presented on the results sheet as a segmental breakdown, similar to the segmental lean analysis. This portion of the result sheet provides both the weight value, as well as a percentage value.

The segmental fat analysis evaluates whether the amount of fat is adequately distributed throughout the body, based on the examinee's ideal body weight based on their height. Each bar shows fat mass in comparison to the ideal.

The Basal Metabolic Rate (BMR) indicates the minimum energy required to sustain vital functions while at rest. The InBody770 uses the Cunningham equation to determine the BMR using a known regression equation based on the amount of LBM an individual has. LBM is known to be closely related to BMR. BMR is usually calculated using indirect Calorimetry, which measures oxygen demand.

However, the InBody770 calculates BMR using Lean Body Mass. Therefore, should the examinee gain LBM during the weight management program, their BMR would also increase, which is a desirable result in any weight management program.

## LEG LEAN MASS, TBW/LBM, REACTANCE, & PHASE ANGLE

Leg Lean Mass —

46.0 lbs

InBody is able to provide Leg Lean Mass. This is of importance because approximately 40% of the total Lean Body Mass can be accounted for in the legs. Providing a value for the total lean body mass in an individual's legs allows for a more personalized health care program.

Leg Lean Mass is the largest component of SMM and plays a significant role in disease risk/ prevention due to its function in health and functional mobility for those of older age.

TBW/LBM -

73.2 %

Total Body Water/Lean Body Mass is presented as a percentage value. This TBW/LBM describes the density of the individual's muscle. Knowing that the majority of TBW is found in the muscle cells of the body, this ratio can provide additional information regarding the health status of the examinee.

TBW(lbs)/LBM (lbs) \* 100

Reactance —

	RA	LA	TR	RL	LL
$\begin{array}{c} \textbf{Xc}(\Omega) \; 5  _{\text{kHz}} \\ 50  _{\text{kHz}} \\ 250  _{\text{kHz}} \end{array}$	18.0	16.2	2.2	13.5	14.9
$50\mathrm{kHz}$	32.9	31.5	3.9	27.0	28.1
250 kHz	23.0	23.4	3.2	20.0	20.1

Reactance is the opposition to a change in current or voltage. In BIA, reactance is a common measurement associated with how cells react to the electrical current. This value is measured in BIA mainly for the purpose in obtaining the phase angle.

Whole Body Phase Angle -

 $6.4^{\circ}$ RA LA TR RL LL  $\phi(^{\circ})$  50 kHz | 6.1 6.0 9.7 6.4 6.5

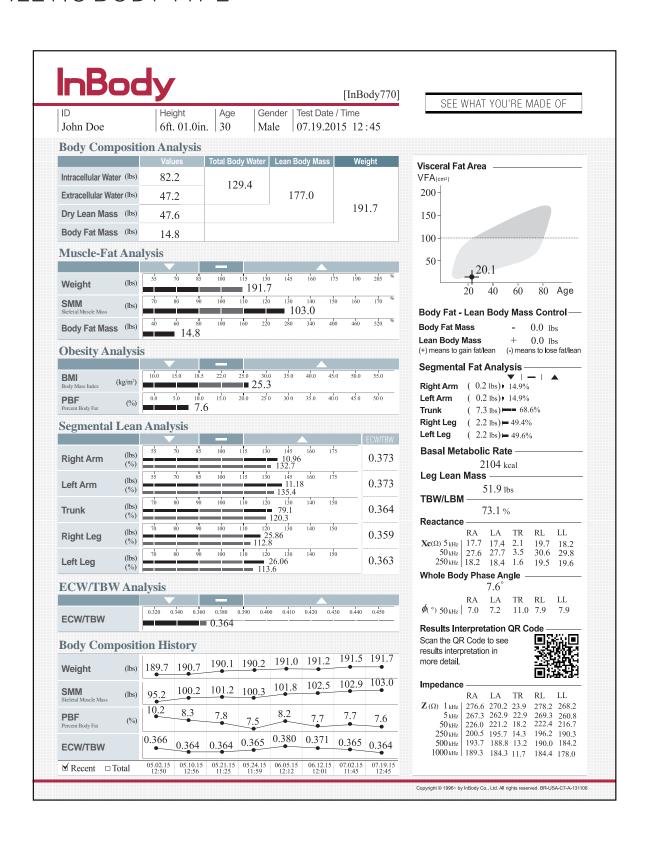
Phase Angle is an indicator of cellular integrity and intracellular water. The InBody provides Whole Body Phase Angle and Segmental Phase Angle at 50 kHz. Higher Phase Angle indicates greater cellular integrity and/or fluids inside the cells.

## **IMPEDANCE**

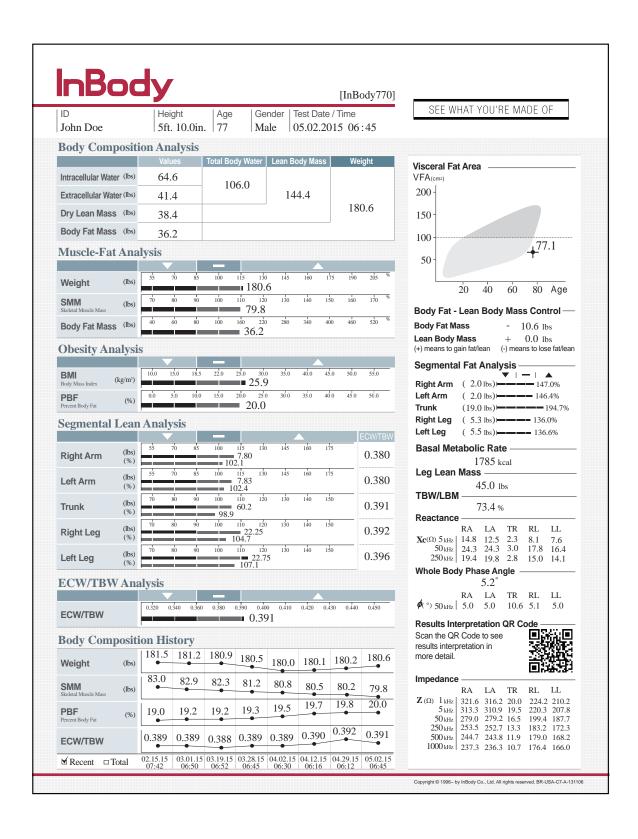
	RA	LA	TR	RL	LL
$\mathbf{Z}\left(\Omega\right) \begin{array}{cc} 1 \text{ kHz} \\ 5 \text{ kHz} \\ 50 \text{ kHz} \end{array}$	363.6	351.0	29.3	282.4	292.3
5 kHz	355.0	343.6	28.3	276.2	285.6
50 kHz	309.4	301.5	23.4	242.1	248.1
250 kHz 500 kHz 1000 kHz	275.1	268.0	19.0	216.3	222.3
500 kHz	264.6	257.4	17.3	210.4	216.4
1000 kHz	257.3	250.7	15.6	206.5	212.9

Impedance is the frequency-dependent opposition of a conductor to the flow of an alternating electric current. Impedance is composed of two main properties, resistance and reactance. InBody provides segmental impedance values at varying frequencies to allow for accurate analysis of the human body. Since reactance is the interrupting force of alternating current flow, it increases in proportion to the integrity of cell membrane. Therefore, reactance and phase angle decrease when the number of cells is low or the cell membrane is more permeable or unhealthy.

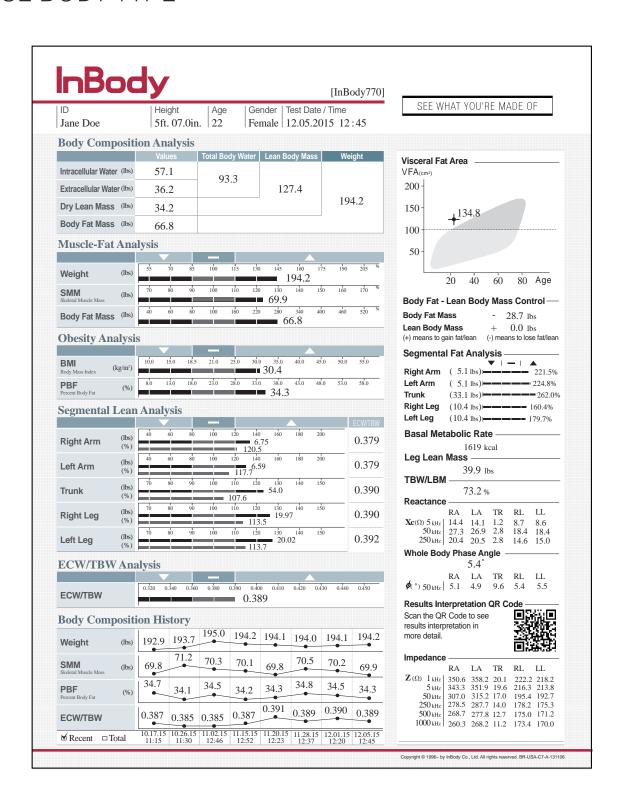
### ATHLETIC BODY TYPE



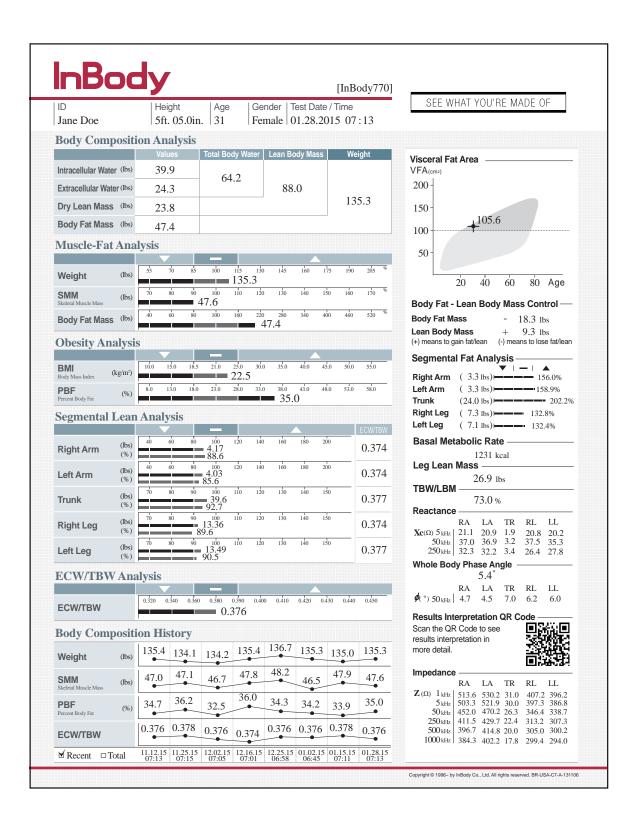
## **ELDERLY BODY TYPE**



### **OBESE BODY TYPE**



## SARCOPENIC OBESE BODY TYPE



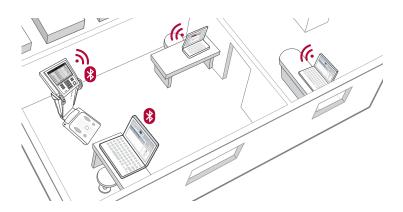
# **ADDITIONAL**

## **DEVICE FEATURES**

#### **Enhanced Security**

Create an Access Code for designated operators, secure your database from unauthorized access, and enable autolock if preferred.





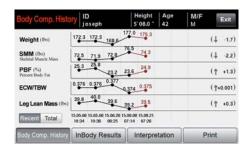
### HL7 Ready

The InBody 770 is HL7 ready and can be easily integrated into your EMR system.



#### Data History Trend Graph

Check your progress right after testing on the touchscreen monitor through graphs that track results over time.



#### Wi-Fi/Bluetooth Integration

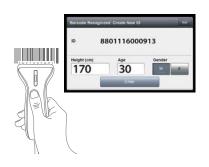
Connect your unit via Wi-Fi or Bluetooth to control your InBody remotely. Save personal information and manage appointments with e-mail service. List user data using the Lookin'Body Data management software.

Secondary devices such as the BSM stadiometers can also connect to your InBody unit and provide extended function for your practice.

#### Barcode Scanner\*

Simply input your client's data by scanning the barcode with the scanner to save time.

\* Software and devices above are optional.



# **ADDITIONAL**

## Maintenance

- Make sure that the InBody device is level to the ground.
- Recalibrate the device by turning it on and off.
- Use InBody Tissue to wipe down your InBody. Do not directly spray any fluid to your InBody.
- No other specific maintenance is required.

# CONTACT

If you have questions regarding your device, please visit our FAQ page at www.inbodyusa.com.

(323)932-6503 info@inbodyusa.com

Let's socialize!



@InBodyUSA